### Jefferson County Human Services

# **Appendix C: Incident Reporting**

#### [Provider Name Here]

## Assuring the Health and Safety of CLTS Waiver Participants

Contracted providers must adhere to protecting the health and safety of the child while in their care. Reportable incidents are defined as actual or alleged events, situations or conditions that pose a significant, immediate and/or ongoing threat or risk to the physical or mental health, safety, well-being or continued community presence of a child waiver participant. Reportable incidents also include the actual or alleged misappropriation of the waiver participant's funds or property or unexpected and unusual adverse environmental conditions that pose serious danger to the participant's health or welfare. Notification is required within 24 hours of the incident or report of the incident. Notification must be made to the assigned participant's Support and Service Coordinator. Notification can also be reported to our 24/7 on call intake line at 920/674-3105 or to the CLTS Supervisor at 920/674-8715.

#### Critical incidents are defined as:

- ✓ Any deaths
- ✓ Any abuse or neglect of the participant inflicted by others known or suspected
- ✓ Any misappropriation of the person's funds or property
- ✓ Errors in medical or medication management by waiver providers that result in a significant adverse reaction requiring medical attention in an emergency room, urgent care center, or hospital
- ✓ Unexpected and urgent emergency room, hospitalizations (any) or urgent care visits
- ✓ Overdoses of non-prescription medications, misuse of prescription medications, use of illicit controlled substance or misuse of alcohol
- ✓ The initiation of an investigation by law enforcement, any allegations as a perpetrator or victim of a crime, runaway
- ✓ The arrest or incarceration of a long-term support program participant or of a provider serving a participant. For providers, this includes only those situations when that provider was performing their role as service provider or for acts previously performed while in the role of service providers.
- ✓ All suspected or confirmed suicide attempts
- ✓ A fire in the home or facility in which the participant lives if the fire resulted in a response by a fire department
- ✓ Damage to the participant's property, if the damage poses or posed a threat to the participant (any referrals to intake).
- ✓ The presence of unsafe or unsanitary environmental conditions in a person's home or a place the individual frequents, including the place the individual works or receives services.
- ✓ Use of isolation, seclusion, or restraint (chemical or physical) without County and the Departments prior approval, detention.

Resolution will occur between the waiver agency, provider and family. Examples of resolution may involve changing staff, updating and enhancing a service plan or intervention plan, examining and modifying the physical environment and may include removal of the waiver participant from situations where risk is present. For more information go to Chapter 9 of the Medicaid Manual <a href="https://www.dhs.wisconsin.gov/waivermanual/waiverch09-08.pdf">https://www.dhs.wisconsin.gov/waivermanual/waiverch09-08.pdf</a>